



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4858

|                             |                                       |              |                        |   |
|-----------------------------|---------------------------------------|--------------|------------------------|---|
| SERIAL NUMBER<br>10/762,390 | FILING DATE<br>01/22/2004<br><br>RULE | CLASS<br>074 | GROUP ART UNIT<br>3681 | ATTORNEY<br>DOCKET NO.<br>ZAHFRI P598US |
|-----------------------------|---------------------------------------|--------------|------------------------|---|

APPLICANTS

Michael Ebenhoch, Friedrichshafen, GERMANY; *YES* *DD*

\*\* CONTINUING DATA \*\*\*\*\*  
*NONE* *DD*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
 GERMANY 103 02 258.9 01/22/2003 *YES* *DD*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 04/26/2004

|  |   |                                |                        |                       |                            |
|--|---|--------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>Allowance Met after<br>Examiner's Signature <i>[Signature]</i> Initials <i>DD</i> | STATE OR<br>COUNTRY<br>GERMANY | SHEETS<br>DRAWING<br>2 | TOTAL<br>CLAIMS<br>73 | INDEPENDENT<br>CLAIMS<br>1 |
|--|---|--------------------------------|------------------------|-----------------------|----------------------------|

ADDRESS  
 020210  
 DAVIS & BUJOLD, P.L.L.C.  
 FOURTH FLOOR  
 500 N. COMMERCIAL STREET  
 MANCHESTER, NH  
 03101-1151

TITLE  
 Selector transmission for a motor vehicle

|                                   |   |  |
|-----------------------------------|---|--|
| FILING FEE<br><br>RECEIVED<br>900 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue ) |
|-----------------------------------|---|--|